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Beth L. Haslam (Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/081,768	02/22/2002	William T. Chen	16172.1	2722

TITLE OF INVENTION: METHOD AND APPARATUS FOR FORMING A METALLIC FEATURE ON A SUBSTRATE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700.00	01/26/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS			
CLEVELAND, MICHAEL B	1762	427-304000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

AGENCY FOR SCIENCE, TECHNOLOGY AND RESEARCH

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Singapore, Singapore

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☒ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

R. Burns Israelson

Date

January 6, 2006

Typed or printed name

R. BURNS ISRAELSEN

Registration No.

42,685

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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FAX TRANSMISSION COVER SHEET

Date: January 6, 2006
To: Issue Fee
United States Patent & Trademark Office
Fax: ~~(512)~~ 273-2885
S7I
Phone:
From: R. Burns Israelsen
Our File: Serial No.: 10/081,768
Filing Date: February 22, 2002
Our Docket: 16172.1

YOU SHOULD RECEIVE 5 PAGE(S), INCLUDING THIS COVER SHEET.
IF YOU DO NOT RECEIVE ALL THE PAGES, PLEASE CALL 801-533-9800

Comments:

Please see attached.

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TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity) (37 C.F.R. 1.311)				Docket No. 16172.1	
Applicant(s): William T. Chen, et al.					
Application No. 10/081,768	Filing Date 02/22/2002	Examiner Cleveland, Michael B	Customer No. 022913	Group Art Unit 1762	Confirmation No. 2722
Invention: METHOD AND APPARATUS FOR FORMING A METALLIC FEATURE ON A SUBSTRATE					
<p style="text-align: center;">Mail Stop Issue Fee COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450</p> <p>Transmitted herewith are the following for the above-identified application.</p> <p><input checked="" type="checkbox"/> Issue Fee Transmittal Form PTOL-85</p> <p><input checked="" type="checkbox"/> Utility Fee: \$ 1400.00 <input type="checkbox"/> Design Fee: _____ <input type="checkbox"/> Plant Fee: _____</p> <p><input checked="" type="checkbox"/> Publication Fee: \$ 300.00</p> <p><input type="checkbox"/> A check in the amount of _____ is attached.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 23-3178 as described below.</p> <p> <input type="checkbox"/> Charge the amount of _____</p> <p> <input checked="" type="checkbox"/> Credit any overpayment.</p> <p> <input checked="" type="checkbox"/> Charge any additional fee required.</p> <p><input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p><u>R. Burns Israel</u> Dated: January 6, 2006 Signature</p> <p>R. BURNS ISRAELSEN Registration No. 42,685</p>					
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